

PP-174 Comparison of *Toxoplasma gondii* excreted-secreted antigens from cell and cell free media in induction of humoral immune response

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Background: The present study was designed to determine the effect of *T. gondii* antigens and their role in stimulating humoral immune response.

Methods: *T. gondii* excreted-secreted antigens were prepared from cell and cell-free media. The SDS-PAGE was used to compare the molecular weight of antigen bands. Two groups of C57BL/6 mice were immunized with both these antigens. Two groups were also separately immunized with fibroblast lysate proteins and adjuvant as negative control. Then these groups were challenged with the RH strain of *T. gondii*. Sera from the immunized mice were assayed by immunoblotting method.

Results: The evaluation of the electrophoretic mobilities of excreted-secreted antigens from cell culture, cell-free media, fibroblast lysate proteins and *Toxoplasma* lysate antigens showed 13, 12, 8 and 8 bands, respectively. In challenge, immunized mice with both excreted-secreted antigens from cell and cell-free media showed more survival rates than the negative groups. In immunoblotting, a 65 kDa band related to cell-free and cellular media reacted with mice sera.

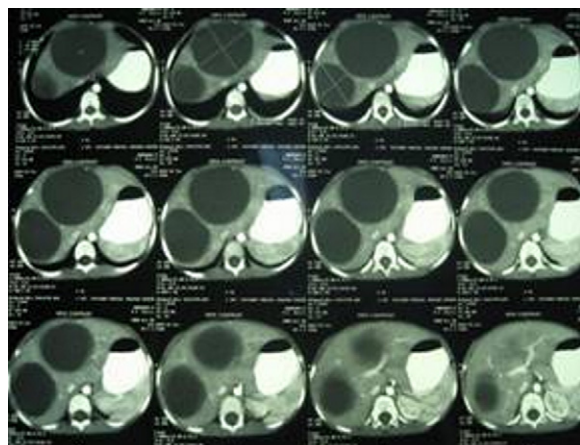
Conclusion: Although, the results indicate differences between electrophoretic patterns of the excreted-secreted antigens from cell and cell-free media, challenge and humoral immune response were identical in both groups.

PP-175 Multiple huge hydatid cysts of liver

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Introduction: Hydatidosis, caused by *Echinococcus granulosus*, is an endemic parasitic disease. The most frequent anatomic locations are liver and lung. Diagnosis is usually based on radiological and serological findings.

Case Description: We present a 6-year-old boy with abdominal pain since one month ago. Sonography and CT scan showed multiple liver cysts. Serum hydatid cyst antibody was positive. With diagnosis of hydatosis surgery was performed and albendazole started for him. Hydatid cyst should be considered in every patient with liver cystic lesion in endemic area.



PP-176 Visceral leishmaniasis: determination of agent by PCR in Yasouj, south of Iran

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Background: Visceral Leishmaniasis is an endemic disease in some parts of Iran. *Leishmania infantum* is the agent of disease in studied areas. In Yasouj city, new cases of patients had reported recently from some villages. In this study, the agent of visceral leishmaniasis determined by PCR in infected dogs.

Methods: In this study 15 infected dogs selected from 5 endemic villages. These dogs had sign and symptoms of canine visceral leishmaniasis. All cases tested by DAT for evaluation of anti leishmanial antibody titers. After necropsy parasitology study conducted by use of impression smear of liver and spleen. Nested PCR examination conducted on smears and tissues of liver and spleen.

Results: From fifteen cases, fourteen dogs had antibody titer above of 1:320 and one of cases was negative. *Leishmania* amastigote was seen in 13 smears of liver and spleen (13 cases). The agent of disease in 14 dogs determined as *Leishmania infantum* and in one dog as *Leishmania major* by nested PCR method.

Conclusion: The majority of determined agent is *L. infantum* such as other regions in Iran. But a new finding is *L. major*, that is the agent of rural cutaneous leishmaniasis in Iran and it's reservoir hosts are gerbils not dogs. This needs to further studies.

PP-177 Lip leishmaniasis: a new variant of cutaneous leishmaniasis

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Introduction: Cutaneous leishmaniasis, is endemic in some regions of Iran. Cutaneous leishmaniasis may appear at unusual sites or present with atypical morphologies. The lip is considered one of the unusual sites.

Case Description: A 17-year-old man with a history of ulceration of lower lip for 3 months. Earlier he was not diagnosed as having any disease. Examination showed a man with swelling of the lower lip. There was ulceration involving the one third of mucosal surface of lower lip extending to the mucocutaneous junction. The floor was covered with granulation tissue. The lower lip was indurated. The angles of mouth were spared. There was regional lymphadenopathy. The lymph nodes were mobile and nontender. No other lymph node groups were enlarged. No evidence of cutaneous leishmaniasis was seen anywhere else. Systemic examination revealed no splenomegaly or hepatomegaly. CBC, ESR, CRP and urinalysis were within normal limits. Mantoux test was within normal limits. Chest-x-ray was normal. Tissue smears with giemsa stained showed Leishman-bodies. The patient was treated with sodium antimony gluconate injection intramuscularly 20 mg/kg/d for 20 days. After 8 weeks the lip healed completely and there was no recurrence in the following 12 months.